MAIL OR TAKE THE COMPLETED FORM AND APPROPRIATE FEE TO YOUR COUNTY TREASURER'S OFFICE

PERSONALIZED PLATE APPLICATION

Fee Collected

\$43.50 for Antique \$44.50 for Motorcycles

Date

______, County Treasurer of ______County

Ve	hicle Owner's In					్ర	° <u>\$</u>			
Name				Phone #:						
								K	s	
-	Address			City				Sta	ate	ZIP
Ve	hicle Informatio	n								
,	Year Make	Style		VIN						
	Current License Plate Number:			Expires	s: Mo	nth			Year	
,	Vehicle Type: (Check O	ene) Auto)			Truck			Mo	otorcycle
>		onalized plates shall no ed disabled plates shall								
>		lized plates shall not o								
>	Dashes and symbols a	are not acceptable; inste	ead lea	ve a blar	ık spac	e.				
>	Letters &/or numbers	cannot be profane, vulg	ar, lew	d or have	an ind	ecent me	eaning.			
Re	gular or Antique	: Auto or Truck	Comi	binatio	n					
	First Choice	One (1) character per box								
-	Second Choice	One (1) character per box								
Re	gular or Antique	: Motorcycle Co	mbin	ation	/ Disa	abled:	Auto d	r Truc	ck Co	mbination
	First Choice	One (1) character per box								
_	Second Choice	One (1) character per box								
Di	sabled: Motorcy	cle Combination								
	First Choice	One (1) character per box								
	Second Choice	One (1) character per box								

INSTRUCTIONS

\$43.50 for Motorcycles;

1. Application for personalized license plates shall be made at your County Treasurer's office.

Applicant's Signature

Personalized Disabled:

\$44.00 for Autos & Trucks;

2. Application must be signed by the applicant and include the appropriate fee. Make check payable to the County Treasurer for your county.

\$45.00 for Autos & Trucks;

- 3. Two (2) plates are issued for regular and disabled personalized plates for autos and trucks and are required to display both, one in front and one on rear of the vehicle.
- 4. One (1) plate is issued for regular and disabled personalized plate for motorcycles and antiques are issued 1 to be displayed on the rear of the vehicle.
- 5. Application for disabled personalized plate(s) are required to submit the original Disabled Certification signed by a healing arts professional or attach a copy of the current Disabled ID card.

Accepted By ___